

## APPLICATION FOR APPROVAL OF LAND SURVEYOR CONTINUING EDUCATION PROVIDER

State Form 49990 (1-01)

**NO FEE**

INDIANA PROFESSIONAL LICENSING AGENCY  
302 WEST WASHINGTON STREET, ROOM E034  
INDIANAPOLIS, IN 46204  
TELEPHONE: (317) 232-2980

**INSTRUCTIONS:**

- 1) Attach descriptive course content outline for each course, pursuant 865 IAC 1-13-6 or 865 IAC 1-14-7, clearly expressing course objectives and indicating number of hours for each course.
- 2) Attach a professional biography of each instructor that indicates compliance with 865 IAC 1-14-9.
- 3) Attach a student evaluation form.

Name of provider	Telephone number
Address ( <i>number and street, city, state, ZIP code</i> )	
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Name of contact person	Telephone number
Address ( <i>number and street, city, state, ZIP code</i> )	
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## COURSES

[illegible]

(Continued on the reverse side.)

INSTRUCTORS		
Instructor's name(s):		Instructor's name(s):
Do you agree to provide a certificate of course completion to every participant that completes your course(s) pursuant to 865 IAC 1-14-13?		
<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>		
Have you read and understand the statutes and rules regarding continuing education that were provided with this application?		
<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>		
NOTARY CERTIFICATE		
I (we) the undersigned, submit this application in conformance with 865 IAC 13. I (we) understand that any violation of the license law or rules on my (our) part will subject me (us) to loss of approval. I (we) certify that the information given in this application is true and correct to the best of my (our) knowledge.		
STATE OF:		COUNTY OF:
Signature of contact person		Signature of Notary Public
Printed or typed name of contact person		Printed or typed name of Notary Public
Date subscribed and sworn to Notary Public	County of residence	Date commission expires
FOR OFFICE USE ONLY		
<div><input type="checkbox"/> Approved</div>		
<div><input type="checkbox"/> Tabled Reason:</div>		
<div><input type="checkbox"/> Denied Reason:</div>		
Board signature		Board signature